



MEDIA RELEASE

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HEALTH BUDGET: A GOOD START BUT MORE TO DO ON DRUG SUPPORT SERVICES

The Australian Injecting and Illicit Drug Users League (AIVL) has welcomed some additional funding for drug treatment in tonight's Federal Budget but is disappointed that other key harm reduction measures have missed out. AIVL is calling on the Australian Government to abandon its planned trial of drug testing for welfare recipients and redirect that funding into frontline services in the wake of the Budget. AIVL is also calling for a stronger focus on people exiting custodial settings to strengthen Australia's efforts under the new national blood borne virus (BBV) and sexually transmissible infections (STI) strategies.

"While the Government will provide \$40M over 3 years to expand GP services (\$20M) and provide additional funding for residential rehabilitation services (\$20M), further investment will be required to ensure that the alcohol and other drug (AOD) service system is able to meet existing demand. Just yesterday, the Government reaffirmed its commitment to implementing a trial of drug testing for welfare recipients in its majority report for the inquiry into the Social Services Legislation Amendment (Drug Testing Trial) Bill 2018. However, the inquiry report is filled with expert testimony urging the Government not to proceed. We would like to see the funding that has been allocated for drug testing of welfare recipients redirected into frontline services," explained Melanie Walker, Chief Executive Officer (CEO) of AIVL.

"There's a full suite of evidence-based interventions in the AOD sector but services are currently under-resourced and struggling to keep up with demand. For instance, we already knew from previous studies that investment in Needle and Syringe Programs (NSPs) between 2000 and 2009 prevented nearly 97,000 Hepatitis C infections and 32,050 HIV infections – for every dollar spent on NSPs, more than \$4 will be returned in savings to the health systemⁱ. AIVL recently released a new report looking at ways to enhance the effectiveness of NSPs across the country to address access issues and maximise the public health benefitsⁱⁱ. NSPs remain a very cost effective way of preventing the transmission of BBVs – increasing access to NSPs should be a high priority.

"Evidence-based AOD treatment is also a good investment. For every \$1 invested in AOD treatment, society gains \$7. However, while approximately 200,000 people receive AOD treatment in any one year in Australia, it is estimated that an additional 200,000 – 500,000 people seeking treatment are unable to access itⁱⁱⁱ. People don't need to be coerced into accessing drug treatment – there just aren't enough treatment places to meet demand. This Budget will go some way towards addressing unmet need but there's a long way to go if we are to meet the needs of those individuals, families and communities struggling to address AOD problems.

"It is also important that people entering and exiting custodial contexts are not forgotten. Ensuring access to the full suite of preventive, harm reduction measures – and ensuring that people are able to continue their engagement with AOD and BBV treatments post-release – are tangible ways that we could protect more Australians from contracting BBVs. There is a real need for a national policy to guide prisons in jurisdictions^{iv}.

"It would be great to see enhanced investment in these types of cost effective harm reduction and demand reduction measures as part of future federal budgets," said Ms Walker.

AIVL is the national organisation representing people who use/have used illicit drugs and is the peak body for the state and territory peer-based drug user organisations.

MEDIA CONTACT: Melanie Walker, CEO, AIVL

0438 430 963

ⁱ Return on Investment 2: Evaluating the cost-effectiveness of needle and syringe programs in Australia:

[http://www.health.gov.au/internet/main/publishing.nsf/content/A407CF4FECBDC715CA257BF0001F98B2/\\$File/retexe.pdf](http://www.health.gov.au/internet/main/publishing.nsf/content/A407CF4FECBDC715CA257BF0001F98B2/$File/retexe.pdf)

ⁱⁱ Needle and Syringe Programs in Australia: Peer-led Best Practice:

<http://www.aivl.org.au/resource/needle-and-syringe-programs-in-australia-peer-led-best-practice/>

ⁱⁱⁱ New Horizons: The review of alcohol and other drug treatment services in Australia:

[http://www.health.gov.au/internet/main/publishing.nsf/content/FD5975AFBDC7013CA258082000F5DAB/\\$File/The-Review-of-alcohol-and-other-drug-treatment-services-in-Australia.pdf](http://www.health.gov.au/internet/main/publishing.nsf/content/FD5975AFBDC7013CA258082000F5DAB/$File/The-Review-of-alcohol-and-other-drug-treatment-services-in-Australia.pdf)

^{iv} A needs analysis for people living with HCV after leaving custodial settings in Australia:

